

Command Spanish[®], Inc., the Nation's #1 provider of occupational Spanish, is offering:

Basic Spanish for Law Enforcement Officers

Hosted by: Kennewick Police Department, Kennewick, WA

This 2.5 day (20-hour) class teaches commands, questions, and statements that are specific to routine police interactions. Participants will also acquire cultural knowledge that will help them interpret actions and words appropriately when dealing with Spanish-speaking persons.

HOW TO REGISTER

Registration Fee: \$179 per person

Payment MUST accompany registration form. Registration will NOT be processed, and seats will not be held without payment. If PO is used, a copy MUST be sent/faxed with the registration form.

Complete the registration form and mail or fax WITH payment to:

Command Spanish[®], Inc.
ATTN: Registrar
P.O. Box 1091
Petal, MS 39465

FAX: 601-582-5177

You will be able to do the following in Spanish:

- ❖ Disarm a suspect;
- ❖ Make arrests and ID individuals;
- ❖ Stop and search a vehicle;
- ❖ Issue body commands and cautions;
- ❖ Issue warrants;
- ❖ Assist in emergencies;
- ❖ Render aid to victims; and
- ❖ Much More!

About the Training:

- ❖ 2.5 day seminar
- ❖ Participants receive a \$40 student package (includes manual, 3 audio CDs, and a field-reference laminated card.

Date & Location

July 18-20, 2011

Kennewick Police Department Tel: 509-582-1358
211 West 6th Avenue
Kennewick, WA 99336

For hotel accommodations or other local details, contact:
Duane Kist, Training/Quartermaster Officer
Duane.Kist@ci.kennewick.wa.us

"Our police officers have embraced Command Spanish. They consider it an essential tool for community policing."

Corando 'Cory' Garcia, Jr., CPL, Training Division
Palm Beach County Sheriff's Office, FL



P. O. Box 1091 • Petal, MS 39465
Tel: 1-800-250-8637, Ext. 206

Registration Deadline: July 1, 2011

Seminar Registration Form: *Basic Spanish for Law Enforcement Officers*

July 18-20, 2011 - Kennewick, WA

One Participant per form - Photocopy as needed.

Name: _____

Title: _____

Organization: _____

Work Address: _____

City: _____ State: _____ Zip Code: _____

Work Tel. #: _____ Fax #: _____

E-mail: _____

Method of Payment:

Amount of \$179 is enclosed

☐ P. O. # _____ (enclosed/attached)

☐ Check # _____ (enclosed)

☐ Money Order (enclosed)

☐ Credit Card: ☐ VISA ☐ Mastercard

Name (as it appears on the card): _____

Card #: _____

Exp Date: _____

Signature (of the card holder): _____